



Upon completion, please email this application along with your resume to hr@toririchard.com

APPLICATION FOR EMPLOYMENT

The following information is requested in order to help us make the best possible placement within TR Retail, LLC (the Company). All portions of this application pertaining to you must be completed. We appreciate the time you spend completing this application. However, please be aware that the completion of this application in no way guarantees you a position with the Company. The Company, in accordance with state and federal laws, does not discriminate on the basis of age, race, religion, color, sex, national origin, marital status, disability, arrest and court record, sexual orientation, or other grounds protected under state or federal law, except where a bona-fide occupational qualification exists. The Company will not refuse to hire a more qualified disabled applicant who is capable of performing all of the essential functions of the job with or without reasonable accommodation. Applicants requiring accommodation in the interview process should contact the Human Resources Department. This application for employment is valid for a three-month period after submission to the Company and only for the position applied.

Please print. All applicants must complete all sections. If additional space is required, attach sheet.

1. PERSONAL INFORMATION

- A. _____
Last Name First Middle
- B. _____
Address Street Telephone
- C. _____
City State Zip
- D. _____
Email Address
- E. Are you a U.S. Citizen or are you legally authorized to work in the U.S.? YES NO
(Note: If offered employment, you will be required to submit documentation as required by the 1986 Immigration Reform and Control Act.)
- F. How were you referred to the Company? _____
- G. Do you have friends or relatives working for the Company? If yes, who? _____
- H. Have you previously applied for a job with the Company? YES NO If yes, where and when? _____

- I. Have you previously worked at this Company? YES NO If yes, where and when? _____

- J. Position for which you are applying _____
(Note: If hired, you will be required to perform work as required by the Company.)
- K. Salary/Wage desired _____
- L. Have you ever been convicted of a felony substantially related to the functions and responsibilities of the job for which you are applying? YES NO *(Note: A criminal abstract may be required for jobs involving the handlings of cash, security or unsupervised contact with other employees or customers.)*

M. You are not required to disclose information about physical or mental limitations that you believe will not interfere with your job performance. However, if you want the Company to consider special arrangements to accommodate a physical or mental impairment, you may suggest the kind of accommodation that you believe would be appropriate for consideration by the Company in the space below. *(Note: If you have been provided a job description of the position for which you are applying, please review the job description carefully to determine whether you are able to perform the essential job functions, with or without a reasonable accommodation, and make your voluntary disclosure accordingly.)*

N. If hired, on what date can you begin work? _____

2. EDUCATION / TRAINING

	High School	Undergraduate College / University	Graduate / Professional
School Name and Location			
Years Completed			
Diploma / Degree			
Describe Course of Study			
Describe any specialized training, apprenticeship, skills, extra-curricular activities, and honors			

3. EMPLOYMENT RECORD

List most recent employer first. If additional space is required, attach sheet.

<u>Employer Name:</u>	<u>Dates of Service (Mo/Yr to Mo/Yr):</u>	<u>Work Performed:</u>
<u>Address:</u>	<u>Telephone number (s):</u>	
<u>Supervisor:</u>	<u>Job Title:</u>	<u>Reason for Leaving:</u>

<u>Employer Name:</u>	<u>Dates of Service (Mo/Yr to Mo/Yr):</u>	<u>Work Performed:</u>
<u>Address:</u>	<u>Telephone number (s):</u>	

<u>Supervisor:</u>	<u>Job Title:</u>	<u>Reason for Leaving:</u>
<u>Employer Name:</u>	<u>Dates of Service (Mo/Yr to Mo/Yr):</u>	<u>Work Performed:</u>
<u>Address:</u>	<u>Telephone number (s):</u>	
<u>Supervisor:</u>	<u>Job Title:</u>	<u>Reason for Leaving:</u>

4. REFERENCES

Give name, job title, relationship, phone number and email of three references not related to you.

1. _____
2. _____
3. _____

5. AVAILABILITY

Days	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Evening							

6. CERTIFICATION

Please read carefully before signing

- A. I certify that the information contained in this application is true and correct to the best of my knowledge, and understand that any false or misleading statements or material omissions, whenever discovered, regarding this application are grounds for disqualification from further consideration or for dismissal from employment.
- B. If employed by TR Retail, LLC., I agree to conform to the guidelines and policies of TR Retail, LLC., and understand that my employment is at-will and can be terminated at any time, with or without cause.
- C. I understand and agree that only the President of TR Retail, LLC., has any authority to enter into any agreement to employ me for any specified period of time or to modify terms and conditions of my employment.
- D. I consent to and authorize TR Retail, LLC. to make a full and complete investigation of my personal or employment history and authorize any former employer, person, firm corporation, school, credit agency, government agency, or other entity to provide TR Retail, LLC. with any information of any sort (including fact or opinion) they may have regarding me. In consideration of TR Retail, LLC.'s review of this application, I release TR Retail, LLC. and all providers of any information from any liability as a result of furnishing and receiving this information.

- E. I understand and agree that I may be required to submit to drug testing and a complete post-offer medical examination, as part of my application for employment. I also understand and agree that I may be required to submit to a complete medical examination during my employment with TR Retail, LLC., provided that such examination is job-related and consistent with business necessity. The cost of such examination will be paid by TR Retail, LLC. I authorize the physician conducting the examination and any laboratory testing any specimen obtained by the physician or collection site to disclose the results of the examination and the laboratory test to TR Retail, LLC. in accordance with state and federal laws. TR Retail, LLC. Will keep such results confidential and disclose the results only to persons who need to know or where required by law.
- F. Although TR Retail, LLC. makes every effort to accommodate individual preferences and religious needs, our business needs may at times make overtime necessary. I understand and accept this as a condition of my employment.
- G. I understand and agree that all of the foregoing terms and conditions will become part of my employment relationship with TR Retail, LLC. if I am employed by TR Retail, LLC.

Authorization / Signature of applicant

Date